

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	PS	66621	2/7
O.I.P.E. CLASSIFIER	10		2/22
FORMALITY REVIEW	1		
RESPONSE FORMALITY REVIEW			

## **INDEX OF CLAIMS**

✓ .....	Rejected	N .....	Non-elected
= .....	Allowed	I .....	Interference
— (Through numeral)...	Canceled	A .....	Appeal
÷ .....	Restricted	O .....	Objected

Claim	Date
Final	
Original	02/05/04 03/05/04 04/05/04 05/05/04 06/05/04
1	✓ ✓ ✓ ✓ ✓ ✓
2	✓ ✓ ✓
3	✓ ✓ ✓
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8	✓ ✓
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Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions  
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